



PATIENT PROFILE

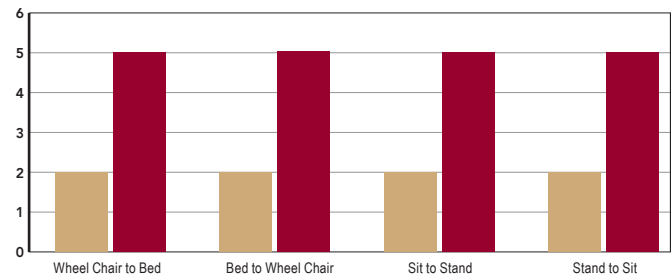
- 87 year old male, hospitalized for 11 days.
- Resident at ERCC for 72 days.
- Diagnosed with Pneumonia
- Prior to his illness, Mr. Arbogast lived in a two-story home with his wife. He was independent with self-care tasks, walked with a cane, and used stairs daily to go up to his bedroom.

Upon admission to ERCC, Mr. A was complaining of severe back pain. He required maximum assistance of two people for bed mobility, transfers, and all self-care tasks. He was able to walk 10 feet with a front wheeled walker and maximum assist of two people. He demonstrated impaired safety awareness and problem-solving abilities.

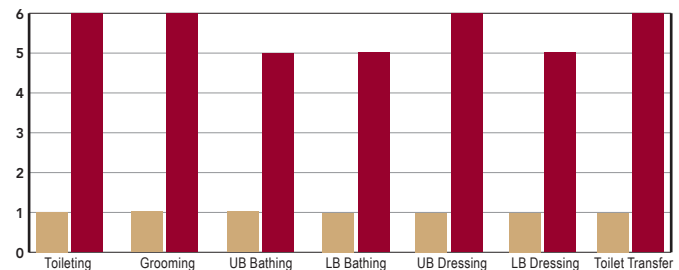
Mr. A was evaluated by Physical Therapy (PT), Occupational Therapy (OT), and Speech Language Pathology (SLP) at ERCC. PT focused on balance, lower body strength, and gait. OT focused on balance, upper body strength, endurance and activities of daily living, including light cooking tasks. ST focused on executive functioning tasks, direction following and safety awareness.

THERAPY OUTCOMES

PHYSICAL THERAPY



OCCUPATIONAL THERAPY



Scale

1 = Max Assist 4 = CGA
2 = Mod Assist 5 = SBA
3 = Min Assist 6 = Independ

Admission

Discharge

Outcome: At time of discharge, Mr. Arbogast was alert and oriented, demonstrating good safety awareness, problem solving and direction following. His activity tolerance had improved to 60 min, and he also demonstrated good dynamic standing balance with a standing tolerance of 10+ min. Mr. Arbogast was able to complete all activities of daily living with no more than stand by assistance, and was able to prepare light meals with minimum assistance. He had increased his upper body and lower body strength by 1 muscle grade, and demonstrated the ability to walk 150 feet with a front wheeled walker. Mr. Arbogast returned home with his family, and was planning to follow up with home health to maximize success of his transition back to home.